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Fill in this information to identify your case	e:	
United States Bankruptcy Court for the:	rania	
Eastern District of Pennsylv	<u>rania</u>	
Case number (If known):	Chapter you are filing under:	
	Chapter 7	
	Chapter 11	
	Chapter 12	☐ Check if this is an
	Chapter 13	amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

06/24

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Robert	Kathleen
	Write the name that is on your	First name	First name
	government-issued picture	F	В
	identification (for example, your driver's license or passport).	Middle name	Middle name
	unver silicense or passport).	Walk	Walk
	Bring your picture identification	Last name	Last name
	to your meeting with the trustee.	II	
		Suffix (Sr., Jr, II, III)	Suffix (Sr., Jr, II, III)
	Include your married or maiden names and any assumed, trade names and doing business as names. Do NOT list the name of any separate legal entity such as a	First name Middle name Last name	First name Middle name Last name
	corporation, partnership, or LLC that is not filing this petition.	Business name (if applicable)	Business name (if applicable)
		Business name (if applicable)	Business name (if applicable)
3.	Only the last 4 digits of your Social Security number or	xxx - xx - <u>8</u> <u>6</u> <u>2</u> <u>8</u>	xxx - xx - <u>7</u> <u>1</u> <u>5</u> <u>3</u>
	federal Individual Taxpayer	OR	OR
	Identification number (ITIN)	9xx - xx	9xx - xx

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tor 1 Robert tor 2 Kathleen	F R	Walk, II Walk	Coop pumber // lunu				
First Name	Middle Name	Last Name	Case number (i	ft known)			
	About Debtor 1:		About Debtor 2 (Spous	se Only in a Joint Case):			
Your Employer Identification	1 <u> </u>		_				
Number (EIN), if any.	EIN		EIN				
			 EIN				
Where you live			If Debtor 2 lives at a di	fferent address:			
	Number Stre	eet	Number Street				
	Philadelphia,	PA 19131-1648					
	City	State ZIP Code	City	State ZIP Code			
	<u>Philadelphia</u>						
	County		County				
	fill it in here. Not	e that the court will send any notices to		ddress is different from yours, fill e court will send any notices to you .			
	Number Stre	eet	Number Street				
	P.O. Box		P.O. Box				
	City	State ZIP Code	City	State ZIP Code			
Why you are choosing this	Check one:		Check one:				
district to file for bankruptcy	Over the last	t 180 days before filing this petition, I this district longer than in any other	Over the last 180 chave lived in this didistrict.	days before filing this petition, I istrict longer than in any other			
	I have anoth (See 28 U.S.	er reason. Explain. .C. § 1408)	☐ I have another reas (See 28 U.S.C. § 1	son. Explain. (408)			
	Your Employer Identification Number (EIN), if any. Where you live Why you are choosing this	Your Employer Identification Number (EIN), if any. EIN EIN	State B Walk Cast Name Cast Name	Case number (and particular prices Case num			

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		Robert	F	Walk, II			
Den	<u>-</u>	Kathleen irst Name	B Middle Na	Walk me Last Name		Case nur	nber (if known)
	' 	iist ivaille	Middle IVe	Last Name			
Par	t 2: Tell the	Court About Yo	ur Bankı	ruptcy Case			
7.	•	f the Bankruptcy choosing to file	Bankrup Ct Ct Ct	ne. (For a brief description of atcy (Form 2010)). Also, go to an apter 7 hapter 11 hapter 12 hapter 13			§ 342(b) for Individuals Filing for iate box.
8.	How you will p	pay the fee	deta chec a cre l nec to P l rec judg offic choc	ills about how you may pay. Took, or money order. If your attoed to pay the fee in installmentary The Filing Fee in Installmentary that my fee be waived (emay, but is not required to, vial poverty line that applies to	ypically, if you are paying price of the property of the prope	ng the fee yourse r payment on you option, sign and a o.). ption only if you a option only if you are unable to pour only if you are unable to the you	k's office in your local court for more lf, you may pay with cash, cashier's r behalf, your attorney may pay with attach the <i>Application for Individuals</i> are filing for Chapter 7. By law, a sur income is less than 150% of the pay the fee in installments). If you a Filing Fee Waived (Official Form
		Have you filed for bankruptcy					
	within the last	within the last 8 years?	☐Yes.	District	When	MM / DD / YYYY	Case number
				District	When	MM / DD / YYYY	Case number
				District	When		Case number
						MM / DD / YYYY	
			✓ No.				
10.	Are any bankr pending or be	ing filed by a	Yes.	-			~
	spouse who is case with you,	or by a	<u> </u>				Relationship to you
	business parti affiliate?	ner, or by an		District	When MM	/ DD / YYYY	Case number, if known
				Debtor			Palationahin ta yau
					140		Relationship to you
				District		/ DD / YYYY	Case number, if known
11.	Do you rent yo	our residence?	□ No. ☑ Yes	Go to line 12. Has your landlord obtained	an eviction indomest a	gainst you?	
			— res	No. Go to line 12.	an eviction judgment a	yamsi yuu?	
					mont About on Fried	a ludous sui A	and Vou (Form 404A) and Elect
				Yes. Fill out <i>Initial State</i>		ı Juagment Agair	ost You (Form 101A) and file it

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Debto Debto		F B	Walk, II Walk		Case number (if known)					
	First Name	Middle Name	Last Name		Case Hambel (William)					
Part	3: Report About Any Busin	nesses You	Own as a Sole Proprietor							
12.	Are you a sole proprietor of	☑ No. Go	to Part 4.							
	any full- or part-time ousiness?		ame and location of business							
k i	A sole proprietorship is a business you operate as an individual, and is not a separate		f business, if any							
	egal entity such as a corporation, partnership, or LLC.	Number	Street							
ŗ	f you have more than one sole proprietorship, use a separate sheet and attach it to this									
ţ	petition.	City		State	ZIP Code					
		Check	Check the appropriate box to describe your business:							
		☐ He	 ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A)) ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) 							
		☐ Sir								
		☐ Sto	☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))							
		☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))								
		☐ No	ne of the above							
13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor?		appropriate sheet, state	e deadlines. If you indicate that you a	are a small busines ment, and federal in	ou are a small business debtor so that it can set s debtor, you must attach your most recent balance noome tax return or if any of these documents do not					
	For a definition of small business	☑ No.	I am not filing under Chapter 11.							
	debtor, see 11 U.S.C. § 101(51D).	☐ No.	siness debtor according to the definition in the							
		☐ Yes.	I am filing under Chapter 11, I am Bankruptcy Code, and I do not che		ebtor according to the definition in the der Subchapter V of Chapter 11.					
		☐ Yes.	I am filing under Chapter 11, I am Bankruptcy Code, and I choose to		ebtor according to the definition in the ochapter V of Chapter 11.					

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Debtor 1 Debtor 2	Robert Kathleen	F B	Walk, II Walk	Case number (if known)
	First Name	Middle Name	Last Name	
Part 4: Repor	rt if You Own or Ha	ave Any Hazardo	ous Property or	Any Property That Needs Immediate Attention
14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?	n or have any	✓ No.		
		Yes. What i	s the hazard?	
	do you own any			<u> </u>
		If imm	ediate attention is	needed, why is it needed?
	le, do you own goods, or livestock			<u> </u>
that must be	e fed, or a building urgent repairs?			
that moodo	argoni ropano.			
		Where	is the property?	Number Chart
				Number Street

City

ZIP Code

State

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Debtor 1	Robert	F	Walk, II	
Debtor 2	Kathleen	В	Walk	Case number (if known)
	First Name	Middle Name	Last Name	

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

✓ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

 ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Ц	I am not required to receive a briefing about credit	
	counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

J	I am not required to receive a briefing about credit
	counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1 Robert Debtor 2 Kathleen		F Walk, II B Walk		Case number (if known)					
	- Fi	irst Name	Middle N	ame Last Name		Case nu	iniber (ii known)		
Dor	t 6. Anguyar 7	Thosa Ousstia	no for D	operting Durnesse					
Par	6: Answer	nese Questio	ons for Re	eporting Purposes					
16.	16. What kind of debts do y have?		16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17.					
			16b.	Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17.					
			16c.	State the type of debts you ow	e that are not cons	sumer debts or busir	ness debts.		
17. Are you filing under Chapter 7?				No. I am not filing under Cha					
Po you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded a administrative expenses are paid that funds will be available to distribute to unsecured creditors?									
18.	How many cre estimate that y			1-49 50-99 100-199 200-999 1,000-5,000 5,001-10,000 10,001-25,00)	-50,000 🗖 50,000	-100,000		
19.	How much do assets to be w	you estimate yo orth?	our 1	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$ \$10,000,001-\$ \$50,000,001-\$ \$100,000,001	\$50 million \$100 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20.	How much do liabilities to be	you estimate yo	our 2	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$ \$10,000,001-\$ \$50,000,001-\$ \$100,000,000	\$50 million \$100 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Par	t 7: Sign Belo	DW .							
For	r you	If I hav States If no at have o I reque I under	re chosen Code. I ur ttorney repubtained ar est relief in retand maluptcy case	nderstand the relief available un presents me and I did not pay of and read the notice required by a accordance with the chapter of king a false statement, conceal	vare that I may pronder each chapter, or agree to pay som 11 U.S.C. § 342(b). If title 11, United Sting property, or obtains	ceed, if eligible, under and I choose to produce who is not an a ates Code, specified taining money or pro	ceed under Chapter 7, 11,12, or 13 of title 11, United ceed under Chapter 7. attorney to help me fill out this document, I		
		X	/s/ Robe	ert F Walk, II	X	/s/ Kathleen B V	Valk		
		-	Robert F V	Valk, II, Debtor 1	,	Kathleen B Walk, De	ebtor 2		
			Executed	on <u>06/13/2025</u>		Executed on 06/13	5/2025 DD/ YYYY		

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Debtor 1 Debtor 2	Robert Kathleen	F B	Walk, II Walk	Case number (if known)
	First Name	Middle Name	Last Name	
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.		proceed under C each chapter for 11 U.S.C. § 342(this petition, declare that I have informed the debtor(s) about eligibility to f title 11, United States Code, and have explained the relief available under ble. I also certify that I have delivered to the debtor(s) the notice required by h § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry with the petition is incorrect.	
		X /s/ Michae	el A. Cibik	Date 06/13/2025
			f Attorney for Debtor	MM / DD / YYYY
		Michael A Printed nam Cibik Law Firm name 1500 Waln Number	е	
		Philadelp	hia	PA 19102
		City		State ZIP Code
		Contact pho	ne (215) 735-1060	Email address cibik@cibiklaw.com
		23110		PA
		Bar number		State

Fill i	in this i	information to ider	ntify your cas	se and this filing:						
Deb	otor 1	Robert	F	=	Walk, II					
		First Name	e M	liddle Name	Last Name					
	otor 2	Kathleer	n E	3	Walk					
(Spo	ouse, if f	First Name	e M	liddle Name	Last Name					
Uni	ted Sta	tes Bankruptcy Cou	rt for the:	Eastern	District of	Pennsylvania				
Cas	se num	ber							Check if this is an amended filing	1
Offi	icial	Form 106A	/B							
		dule A/B:		rty					12/1	5
the c equa addit	atego Illy res tional	ry where you thin ponsible for sup pages, write you	nk it fits bes oplying corre r name and	t. Be as comple ect information. case number (if	ete and accurate a If more space is f known). Answer	is possible. If two needed, attach a every question.	o married po separate si	eople are fili neet to this f	tegory, list the asset ng together, both are orm. On the top of an	
Pa	art 1:	Describe E	ach Resid	ence, Building	g, Land, or Othe	er Real Estate \	You Own c	r Have an	Interest In	_
1.	_	-	any legal or ed	quitable interest in	n any residence, bu	ilding, land, or sim	ilar property	?		
		No. Go to Part 2.	aranartu?							
		Yes. Where is the p	property?							
2.					f your entries from			pages -	\$0.00	
Pa	art 2:	Describe Y	our Vehicl	es						
•			•	•	vehicles, whether to eport it on Schedule (•	s	
3.	Cars	, vans, trucks, trac	tors, sport uti	ility vehicles, mot	orcycles					
	□ N	0								
	√ Y	es								
	3.1	Make:	Toyota	Who has a	n interest in the pro	perty? Check one.			aims or exemptions. Put d claims on Schedule D:	
		Model:	Corrol	la Debtor 2	2 only			•	ms Secured by Property.	
		Year:	2020	_	1 and Debtor 2 only one of the debtors a	nd another	Current val		Current value of the portion you own?	
		Approximate milea	ge: 25700	Check i	if this is community ons)	property (see	\$	14,740.00	\$14,740.00	
		Other information:								
		Source of Valu	ie: KBB							
4.	Wate	rcraft, aircraft, mo	tor homes, Al	ΓVs and other rec	reational vehicles, o	other vehicles, and	accessories			
	_	•	, motors, perso	onal watercraft, fish	ning vessels, snowmo	obiles, motorcycle ac	ccessories			
	∑ N									

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Debtor Walk, Robert F II; Walk, Kathleen B

5.	Add the dollar value of the portion you own for all of your entries from Par you have attached for Part 2. Write that number here		\$14,740.00
Pa	Part 3: Describe Your Personal and Household Items		
Do y	o you own or have any legal or equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware		
	☐ No		
	✓ Yes. Describe	gs, appliances, linens, and other	\$240.00
7.	Electronics		
	Examples: Televisions and radios; audio, video, stereo, and digital equipment; co collections; electronic devices including cell phones, cameras, media		
	□ No		
	✓ Yes. Describe Various used televisions, mobile devices, all or less.	and computers, each valued at \$600	\$180.00
8.	Collectibles of value		
	Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictubaseball card collections; other collections, memorabilia, collectibles	ures, or other art objects; stamp, coin, or	
	☑ No		
	Yes. Describe		
9.	• • •		
	Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, kayaks; carpentry tools; musical instruments	, pool tables, golf clubs, skis; canoes and	
	☑ No ☐ Yes. Describe		
10.	Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
	✓ No ☐ Yes. Describe		
11.	Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessor	ries	
	☑ No ☐ Yes. Describe		

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Debtor Walk, Robert F II; Walk, Kathleen B

12.	Jewelry Examples: Everyday jewell silver		
	☐ No ☑ Yes. Describe	Various used articles of clothing, shoes, and accessories, each valued at \$600 or less.	\$360.00
		Various used pieces of jewelry.	
13.	Non-farm animals Examples: Dogs, cats, bird ✓ No ☐ Yes. Describe	ls, horses	
14.	Any other personal and ho ✓ No ☐ Yes. Give specific information	ousehold items you did not already list, including any health aids you did not list	
15.		of your entries from Part 3, including any entries for pages you have attached per here	\$780.00
Pa	rt 4: Describe You	ur Financial Assets	
Do y	ou own or have any legal o	r equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	✓ No	e in your wallet, in your home, in a safe deposit box, and on hand when you file your petition Cash:	

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Debtor Walk, Robert F II; Walk, Kathleen B

17.	Deposits of money							
		_	counts; certificates of deposit; shares in credit unions, brokerage houses, emultiple accounts with the same institution, list each.					
	☐ No							
	√ Yes		Institution name:					
		17.1. Checking account:	PNC Bank Account Number: 8366	\$166.81				
		17.2. Checking account:	PNC Bank Account Number: 8358	\$690.63				
		17.3. Checking account:	TD Bank Account Number: 4137	\$375.07				
		•	PNC Bank Account Number: 8374	\$344.00				
		17.4. Savings account:	TD Bank					
		17.5. Savings account:	Account Number: 6388	\$106.28				
		17.6. Other financial accoun	TD Bank Account Number: 7657	\$1.03				
18.		or publicly traded stocks	rokerage firms, money market accounts					
	☑ No							
19.	Non-publicly traded s LLC, partnership, and	-	orated and unincorporated businesses, including an interest in an					
	☑ No	•						
	Yes. Give specific information about them							
20.	-	-	otiable and non-negotiable instruments					
	Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them.							
	☑ No							
	Yes. Give specific information about them							
21.	Retirement or pension	n accounts						
	Examples: Interests in	IRA, ERISA, Keogh, 401(k),	403(b), thrift savings accounts, or other pension or profit-sharing plans					
	□ No							
	Yes. List each account separately.	Type of account: Inst	itution name:					
		Pension plan: PS	SERS Pension (Defined Benefit)	\$0.00				

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Debtor Walk, Robert F II; Walk, Kathleen B

22.	Security deposits and prepayments	
	Your share of all unused deposits you have made so that you may continue service or use from a company	
	Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others	
	☑ No	
	☐ Yes	
23.	Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)	
	☐ No	
	✓ Yes Issuer name and description:	
	Ministers and Missionaries Benefit Board Annuity (Defined Benefit)	\$0.00
24.	Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.	
	26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).	
	☑ No	
	☐ Yes	
25.	Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit	
	☑ No	
	☐ Yes. Give specific information about them	
26.	Patents, copyrights, trademarks, trade secrets, and other intellectual property	
	Examples: Internet domain names, websites, proceeds from royalties and licensing agreements	
	☑ No	
	☐ Yes. Give specific information about them	
27.	Licenses, franchises, and other general intangibles	
	Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	
	☑ No	
	Yes. Give specific information about them	
Mone	ey or property owed to you?	Current value of the portion you own? Do not deduct secured
		claims or exemptions.
28.	Tax refunds owed to you	
	☑ No	
	☐ Yes. Give specific information about	
	them, including whether you already filed the returns and	
	the tax years	
29.	Family support	
	Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement	

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Debtor Walk, Robert F II; Walk, Kathleen B

Part 5:

Case number (if known)

	✓ No ☐ Yes. Give specific information			
30.	Other amounts someone owes you			
	Examples: Unpaid wages, disability insura	nce payments, disability benefits, sick pay d loans you made to someone else	v, vacation pay, workers' compensation,	
	✓ No ☐ Yes. Give specific information			
0.4				
31.	Interests in insurance policies Examples: Health, disability, or life insurance	ce; health savings account (HSA); credit, h	nomeowner's, or renter's insurance	
	☐ No			
	Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
		Boston Mutual Whole Life Insurance Policy Ending in 0838	Kathleen B. Walk	\$333.74
		Boston Mutual Whole Life		
		Insurance Policy Ending in		
		7763	Kathleen B. Walk	\$246.51
		Burial Insurance Benefits as		
		Part of MMBB Annuity Face		
		Value \$8,000 (No Cash Value)	Kathleen Walk	\$0.00
		New York Life Insurance Whole		
		Life Policy	Robert Walk, II	\$4,534.81
32.	Any interest in property that is due you f If you are the beneficiary of a living trust, ex property because someone has died.		v, or are currently entitled to receive	
	☑ No			
	☐ Yes. Give specific information			
33.	Claims against third parties, whether or a Examples: Accidents, employment dispute	•	demand for payment	
	☑ No			
	Yes. Describe each claim			
34.	Other contingent and unliquidated claim claims	s of every nature, including countercla	ims of the debtor and rights to set of	f
	☑ No			
	Yes. Describe each claim			
35.	Any financial assets you did not already	list		
	☑ No			
	Yes. Give specific information			
36.	Add the dollar value of all of your entries for Part 4. Write that number here			\$6,798.88

Official Form 106A/B Schedule A/B: Property page 6

Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

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Debtor Walk, Robert F II; Walk, Kathleen B

37.	Do you own or have any legal or equitable interest in any busi	iness-related property	?								
	✓ No. Go to Part 6.										
	Yes. Go to line 38.										
45.	5. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here										
Pa	rt 6: Describe Any Farm- and Commercial Fish If you own or have an interest in farmland, list		perty You Own or Have an II	nterest In.							
46.	Do you own or have any legal or equitable interest in any farm	n- or commercial fishin	g-related property?								
	☑ No. Go to Part 7.										
	☐ Yes. Go to line 47.										
52.	Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here										
Pa	rt 7: Describe All Property You Own or Have a	an Interest in Tha	t You Did Not List Above								
53.	Do you have other property of any kind you did not already lis	st?									
	Examples: Season tickets, country club membership										
	☑ No										
	Yes. Give specific information										
54.	Add the dollar value of all of your entries from Part 7. Write th	at number here	→	\$0.00							
	·										
Pa	rt 8: List the Totals of Each Part of this Form										
	Part 4: Total and Lorde Part C			\$0.00							
55.	Part 1: Total real estate, line 2		-	40.00							
56.	Part 2: Total vehicles, line 5	\$14,740.00									
57.	Part 3: Total personal and household items, line 15	\$780.00									
J		φ100.00									
58.	Part 4: Total financial assets, line 36	\$6,798.88									
59.	Part 5: Total business-related property, line 45	\$0.00									
00	B 40 T 41 T 4 T 4 T 4 T 4 T 4 T 4 T 4 T 4 T										
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00									
61.	Part 7: Total other property not listed, line 54	\$0.00									
		A a a a a a a a a a a	_								
62.	Total personal property. Add lines 56 through 61	\$22,318.88	Copy personal property total	+ \$22,318.88							
				¢22 240 00							
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$22,318.88							

Fill in this inform	ill in this information to identify your case:								
Debtor 1	Robert	F	Walk, II						
	First Name	Middle Name	Last Name						
Debtor 2	Kathleen	В	Walk						
(Spouse, if filing)	First Name	Middle Name	Last Name						
United States E	Bankruptcy Court for the	e: Eastern	Distri	ict of	Pennsylvania				
Case number				_					
(if known)									

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/25

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

F	Part 1: Ider	ntify the Property You	Claim as Exempt					
1.	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)							
lii pi B dd	Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.		Specific laws that allow exemption		
	Brief description:	Various used pieces of furniture, furnishings, appliances, linens, and other similar items, each valued at \$600 or less.	\$240.00	☑	\$240.00	11 U.S.C. § 522(d)(3)		
	Line from Schedule A/B:	6			100% of fair market value, up to any applicable statutory limit			
3.								

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Debtor 1 Robert

Debtor 2

Walk, II _ Case number (if known) __ Kathleen В Walk First Name Middle Name Last Name

F

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	• •			
Brief description:	Various used televisions, mobile devices, and computers, each valued at \$600 or less.	\$180.00	√	\$180.00	11 U.S.C. § 522(d)(3)	
Line from Schedule A/B:				100% of fair market value, up to any applicable statutory limit		
Brief description:	Various used articles of clothing, shoes, and accessories, each valued at \$600 or	\$140.00				
	less.			\$140.00	11 U.S.C. § 522(d)(4)	
Line from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit	_	
Brief description:	Various used pieces of jewelry.	\$220.00	4	\$220.00	11 U.S.C. § 522(d)(4)	
Line from Schedule A/B:	12			100% of fair market value, up to any applicable statutory limit	6.6.6. 3 622(4)(1)	
Brief description:	TD Bank Checking account	\$375.07				
	Acct. No.: 4137		$\mathbf{\Lambda}$	\$375.07	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	_	
Brief description:	TD Bank Savings account	\$106.28				
	Acct. No.: 6388			\$106.28	11 U.S.C. § 522(d)(5)	
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit		

Document Debtor 1 Robert F Walk, II

Middle Name

Debtor 2

First Name

__ Case number (if known) __ Kathleen В Walk Last Name

	on of the property and ule A/B that lists this	Current value of the portion you own		ount of the exemption you claim	Specific laws that allow exemption
property		Copy the value from Schedule A/B	• •		
Brief description:	PNC Bank Checking account Acct. No.: 8366	\$166.81	J	\$166.81	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	
Brief description:	PNC Bank Checking account	\$690.63			_
Line from	Acct. No.: 8358		⊴	\$690.63 100% of fair market value, up to	11 U.S.C. § 522(d)(5)
Schedule A/B: Brief description:	TD Bank Money market account	\$1.03		any applicable statutory limit	_
	Acct. No.: 7657		\(\$1.03	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	_
Brief description:	PNC Bank Savings account	\$344.00			
	Acct. No.: 8374		<u> </u>	\$344.00	11 U.S.C. § 522(d)(5)
Line from Schedule A/B:	17			100% of fair market value, up to any applicable statutory limit	_
Brief description:	PSERS Pension (Defined Benefit)	\$0.00	4	* 0.00	44.11.0.0.5.500(.1)(4.0)(5)
Line from Schedule A/B:	21			\$0.00 100% of fair market value, up to any applicable statutory limit	11 U.S.C. § 522(d)(10)(E)
Brief description:	Ministers and	\$0.00			_
	Missionaries Benefit Board Annuity (Defined				
	Benefit)		₫	\$0.00	11 U.S.C. § 522(d)(10)(E)
Line from Schedule A/B:	23			100% of fair market value, up to any applicable statutory limit	_
Brief description:	New York Life Insurance Whole	\$4,534.81			
	Life Policy			\$4,534.81	11 U.S.C. § 522(d)(8)
Line from Schedule A/B:	31			100% of fair market value, up to any applicable statutory limit	

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Debtor 1 Debtor 2 Robert

Walk, II __ Case number (if known) __ Kathleen В Walk First Name Middle Name Last Name

F

Part 2:	Additional Page					
Brief description of the property and line on <i>Schedule A/B</i> that lists this property		Current value of the portion you own Copy the value from Schedule A/B	Check only one box for each exemption. Copy the value from		Specific laws that allow exemption	
Brief description:	Boston Mutual Whole Life Insurance Policy Ending in 0838	\$333.74	₫	\$333.74	11 U.S.C. § 522(d)(8)	
Line from Schedule A/	_{/B:} 31			100% of fair market value, up to any applicable statutory limit		
Brief description:	Boston Mutual Whole Life Insurance Policy	\$246.51				
	Ending in 7763	•		\$246.51	11 U.S.C. § 522(d)(8)	
Line from Schedule A/	_{/B:} 31			100% of fair market value, up to any applicable statutory limit		

				Do	cument	Page 20 of 47	7			
Fill in	this inform	ation to identify y	our case:							
Deb	tor 1	Robert	F		Walk, II					
200	.0. 1	First Name	Middle	Name	Last Name					
Deb	tor 2	Kathleen	В		Walk					
	use, if filing)	First Name	Middle	Name	Last Name					
	10			Eastern	Dist	rict of Pennsylvani	a			
Unite	ed States E	Bankruptcy Court	for the:	Lustern		- Cilisyivaiii	<u>a</u>			
Case know	e number (i m)	f				<u>—</u>			☐ Check if	this is an
									amende	d filing
Offic	ial Forn	n 106D								
S C I	aodu	<u> </u>	aditors	: \//ho	Havo C	laims Sec	urod	hv E	Proporty	40/45
										12/15
						together, both are equ tries, and attach it to t				
	•	number (if know		ge, illi it out, i	iumber the en	tries, and attach it to t		i tile top	or any additional pag	jes, write your
I. D	o any cred	litors have claim	ns secured by	your property	1?					
				to the court wi	th your other sc	hedules. You have noth	ning else to re	eport on	this form.	
₹	Yes. Fill i	n all of the inform	nation below.							
Pa	rt 1: L	ist All Secure	ed Claims							
2. I	_ist all sec	ured claims. If a	a creditor has m	ore than one s	secured claim. li	ist the creditor	Column A		Column B	Column C
5	separately f	for each claim. If	more than one	creditor has a	creditor has a particular claim, list the other Amount			claim	Value of collateral	Unsecured
	creditors in creditor's na		as possible, lis				Do not deduc	claim		portion
							value of colla	iterai.		If any
2.1	Franklin Union	Mint Federal	Credit	Describe the	property that	secures the claim:	\$15,2	225.00	\$14,740.00	\$485.00
	Creditor's N	Name		2020 Toyo	ta Corrolla		1			
	c/o Corii	nne S. Brenna	n, Esquire	2020 10y0	la Corrolla					
	Klehr Ha	ırrison Harvey	1	As of the da	te you file, the	claim is: Check all that	t apply.			
	Branzbu	rg LLP		☐ Contingent						
	1835 Ma	rket Street, Su	ite 1400	Unliquida	ted					
	Number	Street		Disputed						
		phia, PA 1910								
	City	State	ZIP Code							
	_	the debt? Chec	ck one.	_	n. Check all tha					
	□ Debtor□ Debtor	•				(such as mortgage or s x lien, mechanic's lien)	secured car l	oan)		
		2 only 1 and Debtor 2 o	only	•	ilen (such as ta t lien from a law					
		t one of the debt	•	_ 0	cluding a right to					
	anothe	r		offset)	- 0					
		if this claim relaunity debt	ates to a							
	Date debt	was incurred	8/1/2022	Last 4 digits	of account nu	ımber <u>6 3 3</u>	7			

\$15,225.00

Add the dollar value of your entries in Column A on this page. Write that number here:

			Doo	cument Pa	ae 21 of 47				
Fill in	this inform	ation to identify your ca	ise:						
Deb	tor 1	Robert	F	Walk, II					
Deb	101 1	First Name		Last Name					
D - I-	t0								
	tor 2 use, if filing)	Kathleen	B	Walk					
(- -	,9,	First Name	Middle Name	Last Name					
Unit	ed States E	Sankruptcy Court for the	Eastern	District of	Pennsylvania	_			
Cas	e number								
(if kn								☐ Check if this is an	
								amended filing	
Offic	ial Forn	n 106E/F							
S ~ I	hodu	lo E/E: Cro	ditore Who	Hava Hr	scocuroc	l Claim	\C		
SCI	ledu	ie E/F: Cre	ditors Who	паче от	isecured	Claim	15	12	!/15
Form [?] claims numbe	106A/B) and that are li	nd on <i>Schedule G: Exe</i> sted in <i>Schedule D: C</i> ies in the boxes on the	ecutory Contracts and Creditors Who Have Cla	Unexpired Leases (ims Secured by Pr	Official Form 1060 Operty. If more spa	G). Do not incl ace is needed,	ude any cred , copy the Pa	edule A/B: Property (Of litors with partially secu rt you need, fill it out, rrite your name and cas	ured
Pa	rt 1: L	ist All of Your PRIC	ORITY Unsecured CI	aims					
[✓ No. Go ☐ Yes.	to Part 2.	nsecured claims agains						
3. I	Do any cre	ditors have nonpriori	ty unsecured claims ag	ainst you?					
[_ •	•	in this part. Submit this	•	n your other schedu	les.			
r i	nonpriority ncluded in	unsecured claim, list the	cured claims in the alple e creditor separately for e creditor holds a particu e of Part 2.	each claim. For each	claim listed, identi	fy what type of	claim it is. Do	not list claims already	
								Total clai	im
4.1	Citi/L.L.	Poon		Last A digits of	account number	2 4 0	0	¢6 625	. 00
		Creditor's Name		_ Last 4 digits of	account number	2 4 0		\$6,635	.00
	. ,	icorp Centralized B	ankruntov	When was the d	lebt incurred?	5/1/20	17		
		-	апктиртсу	_					
	PO Box			- As of the date v	ou file, the claim i	s: Check all tha	at apply.		
	Number	Street		☐ Contingent					
	Sioux Fa	alls, SD 57117-0040		 Unliquidated 					
	City	State	ZIP Code	Disputed					
	Who incu	rred the debt? Check of	one.	T (NONDD	IODITY				
	Debtor	1 only			IORITY unsecured	ı cıaım:			
	☑ Debtor	2 only		Student loan				ale each control of the control of t	_
		1 and Debtor 2 only		Ubligations a priority claim		ration agreeme	ent or divorce	that you did not report as	j.
	☐ At leas	t one of the debtors and	d another		sion or profit-sharin	g plans, and ot	ther similar de	ebts .	
	☐ Check	if this claim is for a c	ommunity debt	✓ Other. Specif	•				
	Is the clai	m subject to offset?							

☐ Yes

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Debtor 1 Robert F Walk, II Page 22 of Walk, II

_ Case number (if known) _

 Debtor 2
 Kathleen
 B
 Walk

 First Name
 Middle Name
 Last Name

After listing any entries on this page, number them beginn	ning with 4.4, followed by 4.5, and so forth.				
4.2 Citibank	Last 4 digits of account number 8 4 9 1 \$4,523.				
Nonpriority Creditor's Name					
Citicorp Cr Srvs/Centralized Bankruptcy	When was the debt incurred? 2/1/2013				
PO Box 790040					
Number Street	As of the date you file, the claim is: Check all that apply.				
Saint Louis, MO 63179-0027	☐ Contingent				
City State ZIP Code	Unliquidated Disputed				
Who incurred the debt? Check one.	T (NONDRIGHTY)				
Debtor 1 only	Type of NONPRIORITY unsecured claim:				
Debtor 2 only	☐ Student loans				
☑ Debtor 1 and Debtor 2 only	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 				
At least one of the debtors and another					
At least one of the debtors and another	☐ Debts to pension or profit-sharing plans, and other similar debts				
☐ Check if this claim is for a community debt	 □ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard 				
☐ Check if this claim is for a community debt					
☐ Check if this claim is for a community debt Is the claim subject to offset?					
☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No					
☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes	Other. Specify CreditCard Last 4 digits of account number 5 3 0 3 \$2,905.				
☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes ☐ Han Fin Svcs/fulton	☑ Other. Specify CreditCard				
☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes ☐ Yes ☐ Elan Fin Svcs/fulton Nonpriority Creditor's Name	Other. Specify CreditCard Last 4 digits of account number 5 3 0 3 \$2,905.				
☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes 4.3 Elan Fin Svcs/fulton Nonpriority Creditor's Name Cb Disputes	Other. Specify CreditCard Last 4 digits of account number 5 3 0 3 \$2,905.				
☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes 4.3 Elan Fin Svcs/fulton Nonpriority Creditor's Name Cb Disputes Number Street	CreditCard Last 4 digits of account number 5 3 0 3 \$2,905. When was the debt incurred? 8/1/2023				
☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes 4.3 Elan Fin Svcs/fulton Nonpriority Creditor's Name Cb Disputes Number Street Saint Louis, MO 63166	CreditCard Last 4 digits of account number 5 3 0 3 \$2,905. When was the debt incurred? 8/1/2023 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated				
□ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes 4.3 Elan Fin Svcs/fulton Nonpriority Creditor's Name Cb Disputes Number Street Saint Louis, MO 63166 City State ZIP Code	CreditCard Last 4 digits of account number 5 3 0 3 \$2,905. When was the debt incurred? 8/1/2023 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated				
☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes 4.3 Elan Fin Svcs/fulton Nonpriority Creditor's Name Cb Disputes Number Street Saint Louis, MO 63166 City State ZIP Code Who incurred the debt? Check one.	CreditCard Last 4 digits of account number 5 3 0 3 \$2,905. When was the debt incurred? 8/1/2023 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed				
□ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes 4.3 Elan Fin Svcs/fulton Nonpriority Creditor's Name Cb Disputes Number Street Saint Louis, MO 63166 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only	CreditCard Last 4 digits of account number 5 3 0 3 \$2,905. When was the debt incurred? 8/1/2023 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:				
□ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes 4.3 Elan Fin Svcs/fulton Nonpriority Creditor's Name Cb Disputes Number Street Saint Louis, MO 63166 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only	CreditCard Last 4 digits of account number 5 3 0 3 \$2,905. When was the debt incurred? 8/1/2023 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans				
□ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes Elan Fin Svcs/fulton Nonpriority Creditor's Name Cb Disputes Number Street Saint Louis, MO 63166 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only	CreditCard Last 4 digits of account number 5 3 0 3 \$2,905. When was the debt incurred? 8/1/2023 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:				
□ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes 4.3 Elan Fin Svcs/fulton Nonpriority Creditor's Name Cb Disputes Number Street Saint Louis, MO 63166 City State ZIP Code Who incurred the debt? Check one. □ Debtor 1 only □ Debtor 2 only	CreditCard Last 4 digits of account number 5 3 0 3 \$2,905. When was the debt incurred? 8/1/2023 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as				

☐ Yes

Debtor 1 Robert F Document Page 23 of 47

Walk, II Case nu

Case number (if known)

 Debtor 2
 Kathleen
 B
 Walk

 First Name
 Middle Name
 Last Name

Afte	listing any entries on this page, number them beginning	ng with 4.4, followed by 4.5, and so forth.				
4.4	Jpmcb	Last 4 digits of account number 5 3 5 3 \$5,390.00				
	Nonpriority Creditor's Name MailCode LA4-7100 700 Kansas Lane	When was the debt incurred? 6/1/2024				
	Number Street	As of the date you file, the claim is: Check all that apply.				
	Monroe, LA 71203	Contingent				
	City State ZIP Code	☐ Unliquidated☐ Disputed				
	□ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CreditCard				
4.5	Main Line Health	Last 4 digits of account number \$781.00				
	None rie rite. Cre diterio None	When was the debt incurred?				
	Nonpriority Creditor's Name PO Box 780163	When was the debt incurred?				
		As of the date you file, the claim is: Check all that apply.				
	PO Box 780163	As of the date you file, the claim is: Check all that apply. — Contingent				
	PO Box 780163 Number Street	As of the date you file, the claim is: Check all that apply.				
	PO Box 780163 Number Street Philadelphia, PA 19178	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated				

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Walk, II Case number (if known) Debtor 1 Robert F

Debtor 2	Kathleen	В	Walk	
	First Name	Middle Name	Last Name	

Pa	rt 2: Your NONPRIORITY Unsecured Claims —	Continuation Page					
After	listing any entries on this page, number them beginning	g with 4.4, followed by 4.5, and so forth. Total claim					
4.6	Synchrony Bank/QVC Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number 2 5 9 7 \$782.00 When was the debt incurred? 3/1/2014					
	PO Box 965065 Number Street Orlando, FL 32896-5065 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify ChargeAccount					
4.7	TD Bank Nonpriority Creditor's Name Attn: Bankruptcy	Last 4 digits of account number 6 3 8 \$639.00 When was the debt incurred? 8/1/2003					
	1701 Route 70 East Number Street Cherry Hill, NJ 08003 City State ZIP Code	 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed 					
	Who incurred the debt? Check one. ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify ☐ CheckCreditOrLineOfCredit					
	Is the claim subject to offset? ✓ No ☐ Yes						

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Debtor 1 Robert F Walk, II Case number (if known)

Debtor 2 Kathleen B Walk
First Name Middle Name Last Name

Afte	r listing any entries on this page, number them beginnin	ng with 4.4, followed by 4.5, and so forth.	aim			
4.8	TD Bank	Last 4 digits of account number 4 1 3 7 \$63	3.00			
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 8/1/2012				
	1701 Route 70 East Number Street	As of the date you file, the claim is: Check all that apply.				
	Cherry Hill, NJ 08003	☐ Contingent				
	City State ZIP Code	- ☐ Unliquidated ☐ Disputed				
	 □ Debtor 1 only □ Debtor 2 only ☑ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? ☑ No □ Yes 	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report a priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify CheckCreditOrLineOfCredit	ЗS			
4.9	TD Bank, N.A.	Last 4 digits of account number 8 0 3 2 \$11,0	32.00			
	Nonpriority Creditor's Name Attn: Bankruptcy	When was the debt incurred? 5/1/2007				
	32 Chestnut Street PO Box 1377 Number Street Lewiston, ME 04243 City State ZIP Code Who incurred the debt? Check one. ✓ Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts				
	☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes	☑ Other. Specify <u>CreditCard</u>				

Robert

Document Walk, II

Case number (if known) _

Debtor 1 Debtor 2

В Walk Kathleen Middle Name First Name Last Name

Part 4:	Add the Amounts for Each Type of Unsecured Cla	ain
Fait Ti	Add the Amounts for Each Type of Onsecured Or	2111

F

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

					Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.		\$0.00
	6b.	Taxes and certain other debts you owe the government	6b.		\$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.		\$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	+	\$0.00
	6e.	Total. Add lines 6a through 6d.	6e.		\$0.00
					Total claim
Total claims from Part 2	6f.	Student loans	6f.		Total claim \$0.00
	6f. 6g.	Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6f. 6g.		
		Obligations arising out of a separation agreement or			\$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other	6g.	+	\$0.00 \$0.00

			20000000	$\Gamma UUU \cdot Z \Gamma U I = I$	
Fill in this inform	nation to identify yo	our case:			
Debtor 1	Robert	F	Walk, II		
	First Name	Middle Name	Last Name		
Debtor 2	Kathleen	В	Walk		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States E	Bankruptcy Court f	for the: Easte	rn Distric	et of Pennsylvania	
Case number				_	
(if known)					

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☑ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or co	ompany with whom you have th	e contract or lease	State what the contract or lease is for
2.1	Name			
	Name			
	Number	Street	_	
	City	State	ZIP Code	
2.2				
	Name			
	Number	Street		
	01:		TID 0	
	City	State	ZIP Code	
2.3			_	
	Name			
	Number	Street		
	Oite	04-4-	710.0 - 1-	
	City	State	ZIP Code	
2.4				
	Name			
	Number	Street		
	City	State	ZIP Code	

Fill in this inform						
Debtor 1	Robert	F	Walk, II			
	First Name	Middle Name	Last Name			
Debtor 2	Kathleen	В	Walk			
(Spouse, if filing)	First Name	Middle Name	Last Name	_		
United States E	Bankruptcy Court for t	ne: Easter	n District	of Pennsylvania		
Case number) a
(if known)					_	Check if this amended fili

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

now	n). Answer every qu	estion.					
1.	Do you have any o ✓ No ☐ Yes	codebtors? (If you are filing a joint case, do not list	either spouse as a o	codebtor.)			
2.		Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)					
	☑ No. Go to line 3	B.					
	Yes. Did your s	pouse, former spouse, or legal equivalent live with	you at the time?				
	☐ No						
	Yes. In which	ch community state or territory did you live?		Fill in the name and current address of that person.			
	Name of yo	our spouse, former spouse, or legal equivalent					
	Number	Street					
	City	State ZI	IP Code				
3.	2 again as a codel	otor only if that person is a guarantor or cosigno	er. Make sure you h	your spouse is filing with you. List the person shown in line nave listed the creditor on <i>Schedule D</i> (Official Form 106D), <i>fule D</i> , <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.			
	Column 1: Your co	debtor		Column 2: The creditor to whom you owe the debt			
				Check all schedules that apply:			
3.1	-			Schedule D, line			
	Name			,			
	Number	Street		Schedule E/F, line			
				☐ Schedule G, line			
	City	State	ZIP Code				
3.2]						
	Name			☐ Schedule D, line			
				Schedule E/F, line			
	Number	Street		☐ Schedule G, line			
	City	State	ZIP Code	-			
	Number	Street State	ZIP Code	☐ Schedule G, line			

fill in this inform	ation to identify yo	our case:			
Debtor 1	Robert	F	Walk, II		
	First Name	Middle Name	Last Name		
Debtor 2	Kathleen	В	Walk		
oouse, if filing)	First Name	Middle Name	Last Name	_	Check if this is:
	sankruptcy Court fo	or the: Eastern	District of	Pennsylvania	☐ An amended☐ A supplemen 13 income as
ase number known)					MM / DD / Y

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employ	ment					
Fill in your employment information.		Debtor 1			Debtor 2 or non-filing s	pouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☑ Not employed			☐ Employed ✓ Not employed	
Include part-time, seasonal, or self-employed work. Occupation may include student	Occupation Employer's name					
or homemaker, if it applies.	Employer's address	Number Street			- Number Street	
		City	Sta	te ZIP Code	City State	ZIP Code
	How long employed there?					
Part 2: Give Details Abo	ut Monthly Income					
Estimate monthly income as o unless you are separated.	f the date you file this form. If	you have nothi	ng to rep	ort for any line, write \$	0 in the space. Include your	non-filing spouse
If you or your non-filing spouse helow. If you need more space, a			rmation f	or all employers for tha	at person on the lines	
				For Debtor 1	For Debtor 2 or non-filing spouse	
List monthly gross wages, sal- deductions). If not paid monthly,			2.	\$0.00	\$0.00	
3. Estimate and list monthly over	time pay.		3. +	\$0.00	+\$0.00	
4. Calculate gross income. Add li	ne 2 + line 3.		4.	\$0.00	\$0.00	

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Debtor 1 Debtor 2
 Robert
 F
 Walk, II
 Case number (if known) _

 Kathleen
 B
 Walk

 First Name
 Middle Name
 Last Name

				For Debtor 1	For Debtor 2 or non-filing spouse	
	Copy lin	e 4 here→	4.	\$0.00	\$0.00	
5.	List all p	payroll deductions:				
	5a. Tax ,	, Medicare, and Social Security deductions	5a.	\$0.00	\$0.00	
	5b. Ma n	ndatory contributions for retirement plans	5b.	\$0.00	\$0.00	
	5c. Vol u	untary contributions for retirement plans	5c.	\$0.00	\$0.00	
	5d. Req	uired repayments of retirement fund loans	5d.	\$0.00	\$0.00	
	5e. Insu	urance	5e.	\$0.00	\$0.00	
	5f. Don	nestic support obligations	5f.	\$0.00	\$0.00	
	5g. Unio	on dues	5g.	\$0.00	\$0.00	
	5h. Oth	er deductions. Specify:	5h. +	\$0.00	+\$0.00	
6.		payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h.	6.	\$0.00	\$0.00	
7.	Calculate	e total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00	\$0.00	
8.	List all o	other income regularly received:				
		income from rental property and from operating a business, fession, or farm				
		ch a statement for each property and business showing gross receipts, nary and necessary business expenses, and the total monthly net ome.	8a.	\$0.00	\$0.00	
	8b. Inte	rest and dividends	8b.	\$0.00	\$0.00	
		nily support payments that you, a non-filing spouse, or a endent regularly receive				
		ude alimony, spousal support, child support, maintenance, divorce lement, and property settlement.	8c.	\$0.00	\$0.00	
	8d. Une	employment compensation	8d.	\$0.00	\$0.00	
	8e. Soc	ial Security	8e.	\$2,650.00	\$1,020.00	
	8f. Oth	er government assistance that you regularly receive				
	assi	ude cash assistance and the value (if known) of any non-cash istance that you receive, such as food stamps (benefits under the plemental Nutrition Assistance Program) or housing subsidies.				
	Spe	cify:	8f.	\$0.00	\$0.00	
	8g. Pen	sion or retirement income	8g.	\$2,758.91	\$1,247.20	
	8h. Oth	er monthly income. Specify:	8h. 🛨	\$0.00	+\$0.00	
9.	Add all o	other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$5,408.91	\$2,267.20	
10.		e monthly income. Add line 7 + line 9. entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$5,408.91	\$2,267.20	\$7,676.11

Entered 06/13/25 15:47:54 Desc Main Case 25-12392 Doc 1 Filed 06/13/25 Page 31 of 47 Document Walk, II Debtor 1 F Robert Case number (if known) _ Debtor 2 В Walk Kathleen First Name Middle Name Last Name 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. \$0.00 11. 🛨 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. \$7,676.11 12. Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? **✓** No. Yes. Explain:

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Fill in this informatio	n to identify your case:			
Debtor 1	Robert First Name	F Middle Name	Walk, II Last Name	Check if this is:
Debtor 2 (Spouse, if filing)	Kathleen First Name	B Middle Name	Walk Last Name	 ✓ An amended filing ✓ A supplement showing postpetition chapter 1 expenses as of the following date:
United States Bankruptcy Court for the: Case number		Eastern District of Penns		ia MM / DD / YYYY
(if known)				

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Househole	d			
1. Is this a joint case?				
No. Go to line 2. ✓ Yes. Does Debtor 2 live in a sep ✓ No ☐ Yes. Debtor 2 must file	parate household? Official Form 106J-2, Expenses for	r Separate Household of Debtor 2.		
2. Do you have dependents?	✓ No			
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents' names.	·			. No. Yes.
			-	. No. Yes.
				. No. Yes.
				. No. Yes.
				No. Yes.
Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ _{Yes}			
Part 2: Estimate Your Ongoing I	Monthly Expenses			
Estimate your expenses as of your bar date after the bankruptcy is filed. If this				
Include expenses paid for with non-ca such assistance and have included it of			You	ır expenses
The rental or home ownership exp for the ground or lot.	4	\$4,400.00		
If not included in line 4:				
4a. Real estate taxes			4a	\$0.00
4b. Property, homeowner's, or rent	ter's insurance		4b	\$30.00
4c. Home maintenance, repair, and	d upkeep expenses		4c	\$0.00
4d. Homeowner's association or co	4d	\$0.00		

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Debtor 1 Debtor 2 RobertFWalk, IIKathleenBWalkFirst NameMiddle NameLast Name

			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$0.00
S.	Utilities:		
	6a. Electricity, heat, natural gas	6a.	\$120.00
	6b. Water, sewer, garbage collection	6b.	\$50.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$85.00
	6d. Other. Specify:	6d.	\$0.00
,	Food and housekeeping supplies	7.	\$900.00
			\$0.00
١.	Childcare and children's education costs	8.	
).	Clothing, laundry, and dry cleaning	9.	\$260.00
0.	Personal care products and services	10.	\$110.00
1.	Medical and dental expenses	11.	\$100.00
	Transportation. Include gas, maintenance, bus or train fare.		
12.	Do not include car payments.	12.	\$200.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$0.00
14.	Charitable contributions and religious donations	14.	\$30.00
15.	Insurance.		
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$122.00
	15b. Health insurance	15b.	\$450.00
	15c. Vehicle insurance	15c.	\$256.00
	15d. Other insurance. Specify: Boston Mutual	15d.	\$88.00
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	Specify:	16.	\$0.00
7.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 2020 Toyota Corrolla	17a.	\$411.00
	17b. Car payments for Vehicle 2	17b.	\$0.00
	17c. Other. Specify:	17c.	\$0.00
	17d. Other. Specify:	17d.	\$0.00
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$0.00
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$0.00
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	e.	
	20a. Mortgages on other property	20a.	\$0.00
	20b. Real estate taxes	20b.	\$0.00
	20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
	20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
	20e. Homeowner's association or condominium dues	20e.	\$0.00

Page 34 of 47 Document Robert F Walk, II Debtor 1 Debtor 2 Kathleen В Walk Case number (if known) _ First Name Last Name Middle Name 21. Other. Specify: \$0.00 22. Calculate your monthly expenses. 22a. \$7,612.00 22a. Add lines 4 through 21. 22b. 22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 \$0.00 22c. Add line 22a and 22b. The result is your monthly expenses. 22c. \$7,612.00 23. Calculate your monthly net income. 23a. \$7,676.11 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. 23b. Copy your monthly expenses from line 22c above. \$7,612.00 23c. Subtract your monthly expenses from your monthly income. \$64.11 23c. The result is your monthly net income. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? **✓** No. Yes.

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Fill in this information	n to identify your case:		
Debtor 1	Robert	F	Walk, II
	First Name	Middle Name	Last Name
Debtor 2	Kathleen	В	Walk
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bank	ruptcy Court for the:	Easte	ern District of Pennsylvania
Case number (if known)			

Check if this is an amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

art 1: Summarize Your Assets	
	Your assets
	Value of what you own
Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$22,318.8
1c. Copy line 63, Total of all property on Schedule A/B	\$22,318.8
art 2: Summarize Your Liabilities	
	Your liabilities
	Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	<u>\$15,225.0</u>
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.0
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$33,320.0
Your total liabilities	\$48,545.0
Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$7,676.1
Schedule J: Your Expenses (Official Form 106J)	

Case 25-12392 Doc 1 Filed 06/13/25 Entered 06/13/25 15:47:54 Desc Main Page 36 of 47 Document Debtor 1 Walk, II Robert F Debtor 2 Kathleen В Walk Case number (if known). First Name Middle Name Last Name Part 4: Answer These Questions for Administrative and Statistical Records 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. **√** Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$3,798.24 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: **Total claim** From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00

9e. Obligations arising out of a separation agreement or divorce that you did not report as priority

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

claims. (Copy line 6g.)

9g. Total. Add lines 9a through 9f.

\$0.00

\$0.00

\$0.00

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Fill in this information	to identify your case	:		
Debtor 1	Robert	F	Walk, II	
	First Name	Middle Name	Last Name	
Debtor 2	Kathleen	В	Walk	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bankı	ruptcy Court for the:	Easte	rn District of Pennsylvar	nia
Case number (if known)				

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is No	OT an attorney to help you fill out bankruptcy forms?
✓No	
☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
Under penalty of perjury, I declare that I have re	ad the summary and schedules filed with this declaration and that they are true and correct.
X /s/ Robert F Walk, II	X /s/ Kathleen B Walk
Robert F Walk, II, Debtor 1	Kathleen B Walk, Debtor 2
Date <u>06/13/2025</u> MM/ DD/ YYYY	Date <u>06/13/2025</u> MM/ DD/ YYYY
ואואי עסט אוואי	ININI DD/ TTTT

O	use 25 12052	DOC 1	Document	Page 38 of 4	17	Desc Main	
Fill in this information	n to identify your case	e:					
Debtor 1	Robert	F	Walk, II				
	First Name	Middle Name	Last Name				
Debtor 2 (Spouse, if filing)	Kathleen	В	Walk				
(Opouse, ii iiiiig)	First Name	Middle Name	Last Name				
United States Bank	ruptcy Court for the:	Easte	ern District of Per	nnsylvania	-		
Case number (if known)						Check if this is an amended filing	n
Official Form	n 107				_		
		ial Affair	s for Indi	viduals F	iling for Ba	ınkruptcy	04/25
						pplying correct information. umber (if known). Answer ev	
Part 1: Give Det	ails About Your N	Marital Status a	nd Where You L	ived Before			
1. What is your cur	rent marital status?						
✓ Married							
■ Not married							
2. During the last 3	years, have you live	ed anvwhere other	than where you liv	ve now?			
☑ No	, , , ,	,	,				
	f the places you lived	in the last 3 years	. Do not include wh	ere you live now.			
territories include A	rizona, California, Ida	aho, Louisiana, Ne	vada, New Mexico,	Puerto Rico, Texas	roperty state or territo s, Washington, and Wis	ory?(Community property sta sconsin.)	tes and
☐ Yes. Make su	re you fill out <i>Schedu</i>	ıle H: Your Codebt	ors (Official Form 10	06H).			
Part 2: Explain	the Sources of Yo	our Income					
Fill in the total amo	y income from emplount of income you red int case and you have	ceived from all jobs	and all businesses	s, including part-time		lendar years?	
☑ No							
Yes. Fill in the	e details.						
5. Did you receive	any other income du	ıring this year or tl	he two previous ca	lendar years?			

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

Yes. Fill in the details.

Debtor 1 Debtor 2

	Case 25-1	L2392 I	200 1 Filed 06/1 Documei		13/25 15:47:54	Desc Main
Debtor 1	Robert	F	Walk, II	nt Page 39 of 47		
Debtor 2	Kathleen	В	Walk		Case number (if kr	nown)
	First Name	Middle N	ame Last Name			
			Sources of income Describe below.	Gross income from each source (before deductions and	Sources of income Describe below.	Gross Income from each source (before deductions and
				exclusions)		exclusions)
	nuary 1 of current ye		Social Security	\$13,949.00	Annuity	\$7,482.00
date you	ı filed for bankruptcy	/-	Annuity	\$16,554.00	Social Security	\$6,120.00
For last	calendar year:		Social Security	\$29,736.30	Annuity	\$14,966.00
	1 to December 31,	2024)	Annuity	\$31,530.00	Social Security	\$14,600.00
		YYYY				Ψ::,,σσσ:σσ
For the o	calendar year before	that:	Social Security	\$32,435.00	Annuity	\$14,966.00
(January	1 to December 31,	2023 _)	Annuity	\$32,191.00	Social Security	\$14,147.00
		YYYY				
Part 3: L	ist Certain Payme	ents You M	ade Before You Filed f	or Bankruptcy		
6. Are eithe	er Debtor 1's or Debt	or 2's debts	orimarily consumer debts?			
☐ No.			as primarily consumer del onal, family, or household p	ots. Consumer debts are de	fined in 11 U.S.C. § 101(8	s) as "incurred by
	·	•	•	urpose. pay any creditor a total of \$8	3,575* or more?	
	☐ No. Go to line 7.					
	paid that	creditor. Do		of \$8,575* or more in one of the state of th		
			•	that for cases filed on or after	er the date of adjustment.	
√ Yes.	Dahtan 4 an Dahtan	0				
Y Yes.			ve primarily consumer del	ors. pay any creditor a total of \$6	300 or more?	
	✓ No. Go to line 7.	-	ied for bankruptcy, did you	pay any creditor a total of wi	500 of more:	
	include p	ayments for o		of \$600 or more and the tot s, such as child support and		
Insiders inc you are an	clude your relatives; a officer, director, pers	any general p son in control	partners; relatives of any ge , or owner of 20% or more of		of which you are a general any managing agent, inc	al partner; corporations of which cluding one for a business you
✓ No						
Yes. I	List all payments to a	n insider.				
			otcy, did you make any pay signed by an insider.	ments or transfer any prop	perty on account of a deb	ot that benefited an insider?
✓ No	_					
Yes. I	List all payments that	benefited an	insider.			

	Case 25-	12392 Do	c 1 Filed 06/13/25 Document	Entered Page 40 d	l 06/13/25 19 of 47	5:47:54	Desc Main
Debtor 1 Debtor 2	Robert Kathleen	F B	Walk, II Walk		0		
	First Name	Middle Name			Case	e number <i>(if k</i>	nown)
Part 4: Iden	tify Legal Act	ions, Reposse	ssions, and Foreclosures	5			
	atters, including		y, were you a party in any laws ases, small claims actions, dive				ng? rt or custody modifications, and
☑ No							
Yes. Fill i	n the details.						
		iled for bankrupto he details below.	cy, was any of your property r	epossessed, f	oreclosed, garnisł	ned, attached	, seized, or levied?
☑ No. Go to	line 11.						
Yes. Fill i	n the information	n below.					
		filed for bankrup cause you owed a		g a bank or fin	ancial institution,	set off any a	mounts from your accounts or
√ No							
Yes. Fill i	n the details.						
appointed reco	eiver, a custodia	iled for bankrupto an, or another off and Contribut		n the possessi	ion of an assignee	for the bene	fit of creditors, a court-
13. Within 2 ye	ears before you	filed for bankrup	tcy, did you give any gifts wit	h a total value	of more than \$600	per person?	
√ No							
Yes. Fill i	n the details for	each gift.					
14. Within 2 ye ☑ No	ears before you	filed for bankrup	tcy, did you give any gifts or o	contributions v	vith a total value o	f more than S	6600 to any charity?
Yes. Fill i	n the details for	each gift or contri	bution.				
Part 6: List	Certain Loss	es					
15. Within 1 ye	ear before you f	iled for bankrupto	cy or since you filed for bankr	uptcy, did you	lose anything bed	cause of thef	, fire, other disaster, or
☑ No							
Yes. Fill i	n the details.						

	Case 25-1	2392	Doc 1	Filed 06/13/25 Document	Entered (Page 41 of	06/13/25 15:47:54 47	Desc Main
Debtor 1 Debtor 2	Robert Kathleen	F B		Walk, II Walk		Case number <i>(if kn</i>	nown)
	First Name	Middle	e Name	Last Name		Case Hamber (# Kir	<i></i>
Part 7: List	t Certain Payme	nts or T	ransfers				
46 Within 4	roon bofono view filo	d for bon	لمالم يرمنونسا	ar anyona alaa aa	ing on vour bobe	alf many are transfer any, meanant	ar to onyone you conculted
about seekin	g bankruptcy or pr	reparing a	a bankruptcy	petition?		alf pay or transfer any propert	y to anyone you consulted
Include any a	attorneys, bankrupto	cy petition	preparers, o	r credit counseling age	ncies for services	required in your bankruptcy.	
□No							
√ Yes. Fill	in the details.						
			Descriptio	n and value of any pro	perty transferred	Date payment or	Amount of payment
Cibik Lav			Attamasida	- Face Attannanda C		transfer was made	
		000	Attorney	s Fee; Attorney's Co	osts	05/28/2025	\$2,300.00
	Inut Street Suite Street	900	-			05/28/2025	\$575.00
						03/20/2023	φ3/3.00
			1				
Philadel City	ohia, PA 19102 State Z	IP Code	-				
mail@ci	biklaw.com						
Email or web	osite address						
Porson Who	Made the Payment, if	Not Vou	-				
i erson vviio	made the rayment, ii	Not rou					
Do not include No Yes. Fill 18. Within 2 yordinary coulinclude both Do not include No Yes. Fill 19. Within 10 (These are o	in the details. years before you file transfers are gifts and transfers in the details.	led for ba ss or fina nd transfe s that you	nkruptcy, dic ncial affairs? ers made as s have alread	d you sell, trade, or oth? security (such as the gray) y listed on this statemen	anting of a securit	y interest or mortgage on your	than property transferred in the property). f which you are a beneficiary?
☐ Yes. Fill	in the details.						
Part 8: List	t Certain Financ	ial Acco	ounts, Insti	ruments, Safe Depo	osit Boxes, and	d Storage Units	
or transferre Include check funds, coope	d?	ey market,	, or other fina	incial accounts; certifica		s held in your name, or for you	ur benefit, closed, sold, moved, prokerage houses, pension

	Case 25-1	12392 Doc 1		Entered 06/13/25 15:47:54 age 42 of 47	Desc Main
Debtor 1	Robert	F	Walk, II		
ebtor 2	Kathleen First Name	B Middle Name	Walk Last Name	Case number (if kn	own)
	First Name	Middle Name	Last Name		
21. Do you r	now have, or did yo	ou have within 1 yea	ır before you filed for bankrup	otcy, any safe deposit box or other deposite	ory for securities, cash, or other
√ No					
Yes. Fi	ll in the details.				
22. Have you	u stored property i	n a storage unit or p	place other than your home w	ithin 1 year before you filed for bankruptcy	?
√ No					
Yes. Fi	Il in the details.				
Part 9: Ide	entify Property \	You Hold or Cont	rol for Someone Else		
23. Do you h	nold or control any	property that some	one else owns? Include any	property you borrowed from, are storing fo	r, or hold in trust for someone.
√ No					
Yes. Fi	ll in the details.				
Part 10: G	ive Details Abou	ut Environmenta	l Information		
For the purn	ose of Part 10, the	following definition	ns anniv		
■ Environi substan	mental law means a	any federal, state, or	local statute or regulation con d, soil, surface water, groundw	cerning pollution, contamination, releases or vater, or other medium, including statutes or	
	ans any location, fa it, including dispos		defined under any environmer	ntal law, whether you now own, operate, or u	itilize it or used to own, operate,
	ous material means t, contaminant, or s		mental law defines as a hazar	dous waste, hazardous substance, toxic sub	ostance, hazardous material,
Report all no	otices, releases, an	nd proceedings that	you know about, regardless	of when they occurred.	
_	governmental unit	notified you that yo	ou may be liable or potentially	liable under or in violation of an environm	ental law?
√ No					
Yes. Fi	ll in the details.				
25. Have you	u notified any gove	ernmental unit of an	y release of hazardous mater	ial?	
√ No					
Yes. Fi	ll in the details.				
26. Have you	u been a party in a	ny judicial or admin	istrative proceeding under ar	ny environmental law? Include settlements	and orders.
√ No					
Yes. Fi	Il in the details.				

	Case 25-1	.2392 Doc :	1 Filed 06/ Docum		06/13/25 15:47:54 Desc Main	
Debtor 1 Debtor 2	Robert Kathleen	F B	Walk, II Walk	one rage 40 or	Case number (if known)	
Part 11: G	First Name	Middle Name	Last Name	ns to Any Business	,	
rait ii. C	DIVE Details Abou	at Tour Dusiness	or connection	is to Arry business		
27. Within 4	l years before you f	iled for bankruptcy	, did you own a bu	isiness or have any of the	following connections to any business?	
□ A	sole proprietor or se	elf-employed in a tra	ade, profession, or	other activity, either full-tim	ne or part-time	
□ A	member of a limited	l liability company (l	LLC) or limited liab	ility partnership (LLP)		
□ A	partner in a partner	ship				
☐ A	n officer, director, or	managing executive	e of a corporation			
☐ A	n owner of at least 5	% of the voting or e	equity securities of	a corporation		
✓ No. No	one of the above ap	olies. Go to Part 12.				
Yes. C	heck all that apply a	bove and fill in the	details below for ea	ach business.		
creditors, o	or other parties.			•	ne about your business? Include all financial in	
	the answers on this				clare under penalty of perjury that the answers oney or property by fraud in connection with a	
V		ines up to \$250,000			th. 18 U.S.C. §§ 152, 1341, 1519, and 3571.	
	Robert F Walk, II	III. II. Dobtor 1	×	/s/ Kathleen B Walk	Molls Dobtor 2	
Signa	ature of Robert F Wa	aik, II, Deptor 1		Signature of Kathleen B \	vvalk, Debtor 2	
Date	06/13/2025	_		Date 06/13/2025	_	
Did you atta	ach additional page	s to your Statemen	nt of Financial Affa	irs for Individuals Filing fo	or Bankruptcy (Official Form 107)?	
√ No						
Yes						
Did you pay	y or agree to pay so	meone who is not a	an attorney to help	o you fill out bankruptcy fo	orms?	
✓ No						
Yes. N	lame of person				Attach the Bankruptcy Petition Preparer's Not Declaration, and Signature (Official Form 119	

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Fill in this information	n to identify your case:			
Debtor 1	Robert	F	Walk, II	
	First Name	Middle Name	Last Name	
Debtor 2	Kathleen	В	Walk	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Bank	cruptcy Court for the:	Easte	ern District of Pennsylvania	
Case number				
(if known)				

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

an

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List You	ur Creditors Who Have Secured Clair	ms	
For any credito below.	rs that you listed in Part 1 of Schedule D: C	reditors Who Have Claims Secured by Property (Official	Form 106D), fill in the information
Identify the cre	editor and the property that is collateral	What do you intend to do with the property that see a debt?	cures Did you claim the property as exempt on Schedule C?
Creditor's name:	Franklin Mint Federal Credit Union	☐ Surrender the property.☐ Retain the property and redeem it.	☑ No ☐ Yes
Description of property securing debt:	2020 Toyota Corrolla	Retain the property and enter into a Reaffirmation Agreement.	_ ,,,,
ossamig assu		Retain the property and [explain]: emain bound by the terms of the pre-petition contract, continuing to make the regular month payments.	nly

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btor 2	Kathleen	B Middle Nesses	Walk	Case number (if known)
	First Name	Middle Name	Last Name	
t 2: List	Your Unexpired	Personal Property	Leases	
ormation b	elow. Do not list rea	l estate leases. Unexp		ntracts and Unexpired Leases (Official Form 106G), fill in the ill in effect; the lease period has not yet ended. You may assume).
Describe y	your unexpired pers	onal property leases		Will the lease be assumed?
Lessor's na	me:			☐ No
Description property:	of leased			☐ Yes
Lessor's na	me:			☐ No
				☐ Yes
Description property:	of leased			
Lessor's na	me:			□ No
Danamintian				☐ Yes
Description property:	i or leased			
Lessor's na	me:			☐ No
Description property:	of leased			☐ Yes
Lessor's na	me:			☐ No
Description property:	of leased			☐ Yes
Lessor's na	me:			☐ No
Description property:	of leased			☐ Yes
Lessor's na	me:			□ No
Description property:	of leased			☐ Yes
rt 3: Sigi	n Below			
	lty of perjury, I decla at is subject to an ui		ed my intention about any propert	ty of my estate that secures a debt and any personal

Date 06/13/2025

MM/ DD/ YYYY

MM/ DD/ YYYY

Date 06/13/2025

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of Pennsylvania

In re	٧	Walk, Robert F II								
	٧	Walk, Kathleen B			Case No.		_			
Debt	or				Chapter	7				
			DISCLOSURE OF (COMPENSATION OF	ATTORNEY F	OR DEBTOR				
1.	con	npensation paid to	me within one year befor	r. P. 2016(b), I certify that I e the filing of the petition in contemplation of or in conn	n bankruptcy, or ag	reed to be paid to	me, for services rendered			
	For	legal services, I h	ave agreed to accept			<u> </u>	\$2,300.00			
	Pric	or to the filing of th	is statement I have receiv	/ed		<u></u>	\$2,300.00			
	Bala	ance Due					\$0.00			
2.	The	e source of the cor	npensation paid to me wa	s:						
	√	Debtor	Other (specify)							
3.	The	The source of compensation to be paid to me is:								
	√	Debtor	Other (specify)							
4.		I have not agreed firm.	to share the above-discl	osed compensation with a	ny other person un	less they are mem	bers and associates of my			
		_		d compensation with a other			-			
5.	In re	eturn for the above	e-disclosed fee, I have ag	reed to render legal service	e for all aspects of	the bankruptcy ca	se, including:			
	a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;									
	b.	Preparation and	filing of any petition, sche	edules, statements of affair	rs and plan which n	nay be required;				
	C.	Representation	of the debtor at the meeting	ng of creditors and confirm	ation hearing, and	any adjourned hea	arings thereof;			
6.	Вуа	agreement with the	e debtor(s), the above-dis	closed fee does not includ	le the following serv	vices:				

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B2030 (Form 2030) (12/15)

Filing fee plus Costs & Expenses. Motion to Extend the Stay. Continued Meeting of Creditor Hearings, Addition of Creditor after Filing Petition, Motions to Avoid Liens, Motions for Relief from the Automatic Stay, Motions to Dismiss Case, Adverserial Proceedings & Discharge Litigation, Depositions, Asset Cramdowns, Objection to Proof of Claims, Certification of Stipulation Defaults, Motions for Plan Modifications, Motions for Reconsideration, Vacate Wage Orders, Praceipe for Discharge, Bankruptcy Chapter Conversions, Redemption of Property, Lexis & Pacer Research, Credit, Property, Judgements, & Liens Reports. The above legal services will be billed at a hourly rate of \$375 per hour per attorney

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

06/13/2025 /s/ Michael A. Cibik

Date Michael A. Cibik
Signature of Attorney

Bar Number: 23110 Cibik Law, P.C. 1500 Walnut Street Suite 900 Philadelphia, PA 19102 Phone: (215) 735-1060

Cibik Law, P.C.

Name of law firm